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NOTE ON A CASE OF HUMAN INFECTION WITH *ISOSPORA HOMINIS* PROBABLY ORIGINATING IN THE UNITED STATES

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On the study of the feces of an American recently arrived in Manila from the United States, and who had been suffering from intermittent diarrhea and abdominal discomfort, the origin of which is not entirely clear, I have discovered a moderately heavy infection with *Isospora hominis* Rivolta, 1878 (emend. see Dobell, 1919). Circumstances connected with the case lead me strongly to the belief that the infection was contracted in the United States.

The object of this note is to call attention to this case and also to eleven others found in the United States since 1918, by Kofoid and his co-workers (1919, 1920) which seem so far to have escaped comment or even attention. In 1918 I directed attention (Haughwout, 1918) to the number of cases of human coccidiosis that were being detected in the Eastern Mediterranean area and in troops returned from there, and ventured the prediction that under the prevailing war conditions other cases might be expected to crop up at almost any time or place. It would seem as if this prediction is being fulfilled.

How serious a medical and sanitary problem is likely to be presented, it is hard to say. We have little knowledge of the clinical phenomena, and still less of the pathology of "human coccidiosis." The general impression is that the disease is not harmful to the adults who have been observed, but we have no knowledge of its effects on children or on people of lowered vitality. For that reason I think it unwise to adopt too placid an attitude toward these parasites.

Moreover, the outlook for an exceedingly interesting epidemiological study seems to me to be especially promising if the cases so far reported are traced and carefully studied, and all the contacts rounded up and examined. The cysts of the coccidia are highly resistant to untoward environmental conditions and to disinfectants and chemical reagents. They likewise seem to remain viable over long periods of time. We have reason to believe that the cysts of *Isospora hominis* will show the same attributes. This makes the prevention of dissemination a much more serious problem than is the case with cysts of the other intestinal protozoa of man, which are much less resistant to untoward conditions and are embued with far less powers of longevity.

With the idea of aiding in any studies that may be undertaken in the United States, Professor Elmer D. Merrill, director of the Bureau of Science, has authorized the transmission of material from our case to the following specialists in the United States, where it will be on hand for comparison:

Professors Gary N. Calkins, Columbia University, New York; R. W. Hegner, Johns Hopkins University, Baltimore, Md.; Henry B. Ward, University of Illinois, Urbana, Ill.; Charles A. Kofoid, University of California, Berkeley, Calif.; R. B. Gibson, Iowa State University, Iowa City, Ia.; Ernest E. Tyzzer, Harvard University Medical School, Boston, Mass.; Kenneth M. Lynch, Medical College of the State of South Carolina, Charleston, S. C.; James C. Todd, University of Colorado, Boulder, Colo.; Mark F. Boyd, University of Texas, Galveston, Tex., and Allen J. Smith, University of Pennsylvania.

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